U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 4723	2. Fiscal Year Covered From:			
,	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name John	Name CARPENTERS LOCAL UNION 551 HOUSTON & VICINITY			
	Labor Organization File Number 517-497			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 2600 HAMILTON ST.	Street 2600 HAMILTON ST.			
City Houston	City HOUSTON			
State Texas ZIP Code + 4 77004	State Texas ZIP Code + 4 77004			
5. Position in labor organization. BUSINESS MANAGER/FINANCIAL SECRET.				
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests				
(except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of				
monetary value from an employer whose employees your organizati	on represents or is actively seeking to represent.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street	7.b. Amount.			
Sit et l				
City The state of				
State ZIP Code + 4				
Signature				
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	ing documents), has been examined by the signatory and is, to the best of the			
Signed XB	on 18-4-05 (713) 659-7851			
	Date Telephone Number			

Name of Person Filing JOHN BELL	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or inc dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or directly to, or otherwise	
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name ZENITH ADMINISTRATORS	generoong € 1 · · · · · · · · · · · · · · · · · ·	
Trade Name, if any:	a. Labor Organization b. Trust	
P.O. Box, Bldg., Room No., if any SUITE 400	C. Employer	
Street 9555 W. SAM HOUSTON PARKWAY SOUTH	с. Етрюуег	
City HOUSTON		
State Texas ZIP Code + 4 77099		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name ZENITH ADMINISTRATORS	TRUSTEE ENTERTAINMENT BIRD HUNTS ON 2-21-04 AND 9-18-04	
Trade Name, if any:	2-21 VT AND 3-10-01	
P.O. Box, Bldg., Room No., if any SUITE 400		
Street 9555 W. SAM HOUSTON PARKWAY SOUTH	11.b. Approximate dollar value of such dealing.	\$113
City HOUSTON	12.a. Nature of interest held or income receiv	Marchine control and control a
State Texas State	NONE	
	12.b. Amount.	\$0
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	. •
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
State and Association and Asso		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Filing JOHN BELL	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name HARPER & PEARSON COMPANY Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any SUITE 1000 Street ONE RIVERWAY City HOUSTON	b. Trust	
State Texas ZIP Code + 4 77056		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name HARPER & PEARSON COMPANY Trade Name, if any: P.O. Box, Bldg., Room No., if any SUITE 1000 Street ONE RIVERWAY	TRUSTEE ENTERTAINMENT BIRD HUNTS ON 2-21-04 AND 9-18-04	
City HOUSTON		200-100 miles
State Texas ZIP Code + 4 77056	11.b. Approximate dollar value of such dealing.	\$113
	12.a. Nature of interest held or income received.	
	NONE	
	12.b. Amount.	\$0